



# AMENDMENT TO FINAL PLAN APPLICATION

In accordance  
with Section 24, Article V of the City Code

Application # \_\_\_\_\_  
Date Filed \_\_\_\_\_  
Total Fee \_\_\_\_\_

## 1. SUBJECT PROPERTY

Project Name \_\_\_\_\_  
Street Address \_\_\_\_\_  
Zone \_\_\_\_\_ Historic area designation ☐ Yes ☐ No  
Lot \_\_\_\_\_ Block \_\_\_\_\_ Subdivision \_\_\_\_\_  
Tax Identification Number **(MUST BE FILLED IN)** \_\_\_\_\_

## 2. APPLICANT

Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite No. \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Daytime Telephone \_\_\_\_\_

## 3. ARCHITECT/ENGINEER/DEVELOPER

**Architect's Name** \_\_\_\_\_  
Architect's Maryland Registration Number \_\_\_\_\_ Telephone \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Engineer's Name** \_\_\_\_\_  
Engineer's Maryland Registration Number \_\_\_\_\_ Telephone \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Developer's Name** \_\_\_\_\_ Telephone \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

## 4. PROPERTY OWNER

Name \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite No. \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Daytime Telephone \_\_\_\_\_

## 5. CITY PROJECT NUMBER

Original Site Plan Number \_\_\_\_\_ Date Approved \_\_\_\_\_  
Name of previously approved Final Plan \_\_\_\_\_

## 6. WORK DESCRIPTION

Please state clearly changes requested from final approved plan.

## 7. PROJECT DETAIL INFORMATION

### a. POPULATION CHANGES ( if any)

Changes in population estimated due to amendment.

Employee estimate: Total number

Total number per shift

Resident estimate: Total number

Total number per dwelling unit

### b. PLEASE SUPPLY THE FOLLOWING INFORMATION

DEVELOPMENT INFORMATION		REQUIRED	PROVIDED
1. Site (square feet)			
2. Site Area (acres)			
3. Total Number of Dwelling Units/Lots			
4. Height of Tallest Building			
5. Green Area (square feet)			
6. Number of Dwelling Units/Acre			
7. Lot Coverage (Percent)			
8. Green Area (Percent)			
9. Residential			
a. Single Family Detached	# Units		
b. Single Family Attached	# Units		
c. Multi-Family Condo	# Units		
d. Multi-Family Apartment	# Units		
e. Other			
10. Retail/Commercial	Sq. Ft.		
11. Restaurant Class: <input type="checkbox"/> A <input type="checkbox"/> B <input type="checkbox"/> C	Sq. Ft.		
12. Office/Professional	Sq. Ft.		
13. Warehouse/Storage	Sq. Ft.		
14. Parking			
15. Shared Parking/Waiver			
16. Other			
17. Total			

## SUBMISSION REQUIREMENTS

1. Set of plans per the respective checklist. Plans must be folded to 8 1/2 x 11."
2. Completion of the table above.

I have read and complied with the submission requirements and affirm that all statements contained herein are true and correct.

Applicant's Name (*please print*) \_\_\_\_\_

Applicant's Signature \_\_\_\_\_ Date \_\_\_\_\_

Daytime Telephone \_\_\_\_\_



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Daytime Telephone \_\_\_\_\_

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Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Engineer's Name** \_\_\_\_\_  
Engineer's Maryland Registration Number \_\_\_\_\_ Telephone \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_

**Developer's Name** \_\_\_\_\_ Telephone \_\_\_\_\_  
Street Address \_\_\_\_\_ Suite Number \_\_\_\_\_  
City \_\_\_\_\_ State \_\_\_\_\_ Zip Code \_\_\_\_\_  
Contact Person \_\_\_\_\_ Telephone \_\_\_\_\_

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